

Congressman Charles W. Dent Application for Congressional Nomination to U.S. Service Academies

(Please type or print)

NAME		
Last	First	Middle
PERMANENT ADDRESS Street		
City, State, Zip Code		
Phone No. ()		
MAILING ADDRESS: (If diffe	erent than permanent address)	
City, State, Zip Code		
CITY/TOWNSHIP/BOROUG	H of RESIDENCE	
COUNTY OF RESIDENCE		
DATE OF BIRTH	_AGE_	
OCIAL SECURITY #U.S. CITIZEN		
HEIGHT	_ WEIGHT	
DO YOU WEAR GLASSES?	CONTACT LENSES?	
	R/ L/	

HIGH SCH	[OOL
Stree	et
City,	, State, Zip Code
DATE OF	H.S. GRADUATION
	G.P.A. of
COLLEGE	ATTENDING (IF APPLICABLE):
Stree	et
City,	, State, Zip Code
Dorr	m/Residence Phone No. ()
PARENTS	OR GUARDIANS (Circle One)
Fath	er's Name
Addı	ress
City,	, State, Zip Code
Occi	pation & Employer
Wor	k Phone No. ()Home Phone ()
Mot	her's Name
Addı	ress
City,	State, Zip Code
Wor	k Phone No. ()Home Phone ()
ARE EITH	ER OF YOUR PARENTS A CAREER MILITARY OFFICER?
Motl	ner Father
Bran	ch of Service Rank

Are the	ey Retired?		
NUMBER O	F BROTHERS _	SIS	TERS
	RICULAR SCHO	OOL AND COMMUNI	TY ACTIVITIES:
Organization	Office He	ld/Awards Earned Clas	ss Yr of Participation (Fr/So/Jr/Sr)
SPORTS: Type	Position	Letters/Awards	Class Yr of Participation (Fr/So/Jr/Sr)
HAVE YOU Employer	EVER BEEN EM Position	IPLOYED?	Dates of Employment
	EVER BEEN AR IS OF THE LAW	,	ED, OR FINED FOR ANY
	LICABLE, STATE	E NAME AND PLACE	TE DESCRIPTION OF INCIDENT(S) OF COURT, NATURE OF OFFENSE, EPARATE SHEET FOR THIS).

NAMES AND ADDRESSES OF 3 HIGH SCHOOL/COLLEGE FACULTY MEMBERS ADULT FRIENDS, OR EMPLOYERS YOU HAVE ASKED TO WRITE LETTERS ENDORSING YOUR CANDIDACY:					
CHECK ONE A	ND COMPLETI	Ξ:			
SAT:	Date	Scores M	V		
ACT:	Date	Scores M	V		
I have not tak	en the required te	ests, but do plan to take SA	T/ACT on		
NOMINATION. EACH ACADEM	Please note: IT IY ON THEIR O	IES BY PREFERENCE IS UP TO EACH APPLIC WN. NavalMercha	CÀNT TÓ ALSO	CONTACT	
ESSAY: In appro U.S. Service Acad	•	ds or less, please state why separate sheet.	y you want to atte	end one of the	
Also, please inclu	de a recent, walle	t-size photograph.			
Please attach or su	ıbmit any additio	nal information you may w	vant to present.		
ALL CON RETURNED BY	MPLETED FOR OCTOBER 14 ^T	MS AND REQUESTED H, 2005	MATERIALS N	MUST BE	
RETURN TO:	Attn: 701 V	ressman Charles W. Dent Jason Lane West Broad Street, Suite 20 ehem, PA 18018	00		

Honorable Charles W. Dent

Note: Important. Candidates selected for one of the Service Academies receive an outstanding and costly education at the expense of the Federal Government. Graduates are required to serve a minimum of five (5) years on active duty after graduation. In making nominations, I am most anxious to select individuals who are sincerely motivated to become professional officers in the Armed Forces. For this reason, I ask every applicant to sign the statement below:

CERTIFICATE

I,	, a candidate for nomination to one of the
	Academies, do hereby certify that my application is motivated primarily
by a desire to serve m	y country as a professional officer. It is my intention, if I receive an
appointment, to gradu	ate from the Academy. I make this pledge in good conscience.
Date:	Signature: